

**U. S. Patent and Trademark Office: U. S. DEPARTMENT OF COMMERCE**  
Approved for use through 10/31/2002,OMB 0651-0031  
**PTO/SB/08A (10-01)**

INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				
Substitute for form 1449A/PTO		Complete If Known		
		Application Number	10/524,763	
		Filing Date	April 26, 2005	
		First Named Inventor	RE Mueller, et al.	
		Art Unit	CENTRAL 3722	
		Examiner Name	AU S. Addisu	
Sheet	1	of	1	Attorney Docket Number
DNAG-300-US				

**U.S. PATENT DOCUMENTS**

SEARCHED PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Page, Column, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (If Known)			
SA	AA	US-4,480,950	11/6/84	Kraft, et al.	

## **FOREIGN PATENT DOCUMENTS**

**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See attached Kinda Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the application number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 1B if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

NON-PATENT LITERATURE DOCUMENTS

**'EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language transcript is required.

Examiner Signature	Sara A D D 150	Date Received	10/13/86
--------------------	----------------	------------------	----------